

#### SNS COLLEGE OF NURSING Saravanam Patti (po), Coimbatore.



#### DEPARTMENT OF NURSING

COURSE NAME: B.Sc. (Nursing) III Year.

SUBJECT: MEDICAL SURGICAL NURSING II

UNIT: IV-FEMALE REPRODUCTIVE SYSTEM DISORDERS

AND ITS MANAGEMENT

TOPIC : PELVIC INFLAMMATORY DISEASE





# PELVIC INFLAMMATORY DISEASES



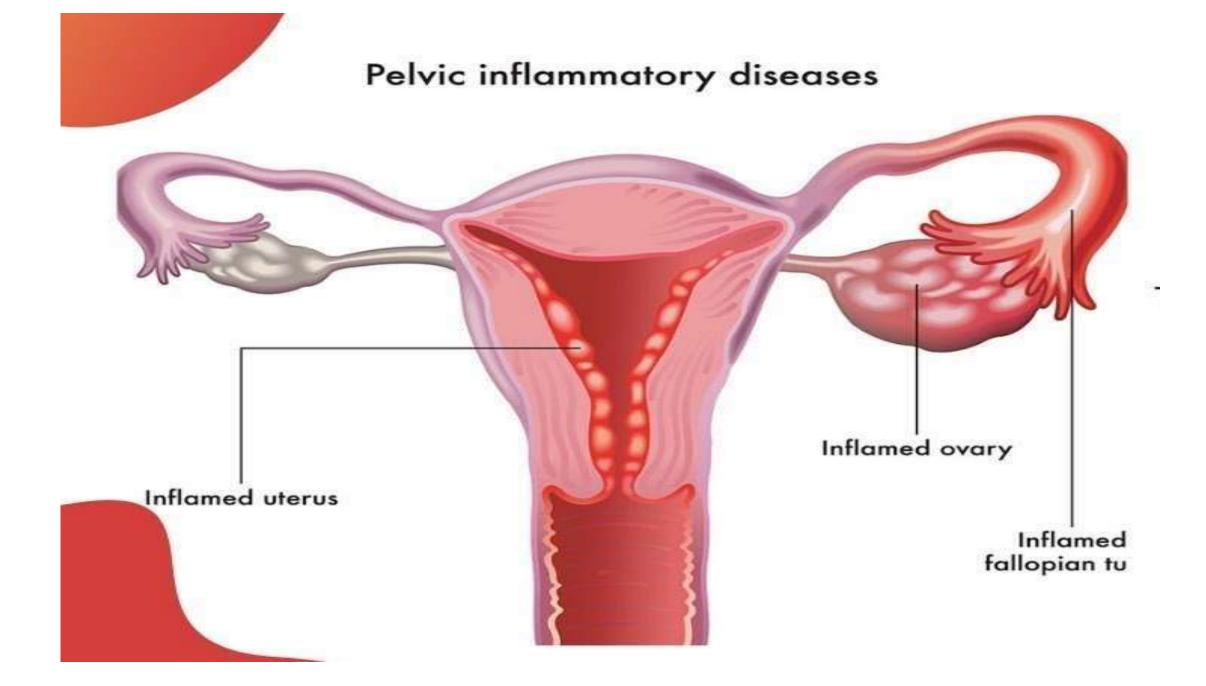
#### **DEFINITION**



- Pelvic inflammatory disease (PID) is an infection of the female reproductive organs. It most often occurs when sexually transmitted bacteria spread from vagina to uterus, fallopian tube or ovaries.
- Infection of Upper genital tract -
- 1. Vagina (colpitis)
- 2. Cervix (endocervicitis)
- 3. Uterus (endometritis)
- 4. Fallopian tube (salpingitis)
- 5. Ovaries (oophoritis)

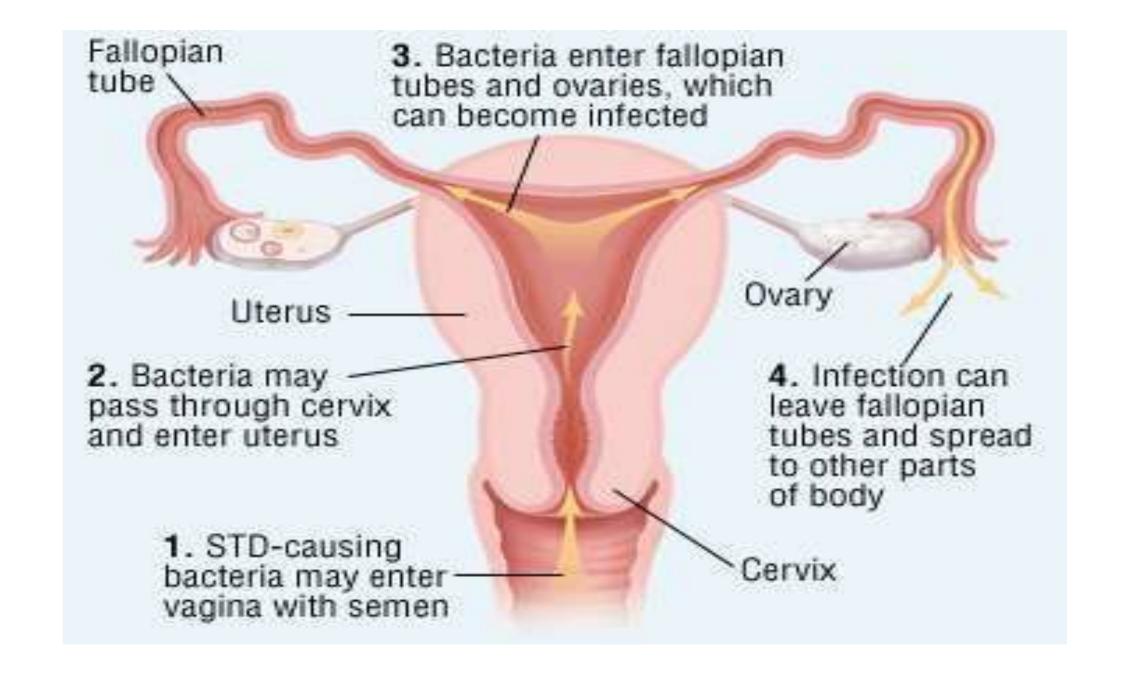
















## **CAUSING ORGANISM**

It is a bacterial infection

• Bacteria –Neisseria gonorrhea or Chlamydia trachomatis .

#### **EPIDERMOLOGY**

3-10% in INDIA according to ncbi.nih.gov 15-37% in SOUTHEAST according to ncbi.nih.gov





### RISK FACTORS

- A numbers of factors might increase your risk of pelvic inflammatory diseases, including:
- 1. Being a sexually active women younger than 25 year old.
- 2. Having multiple sex partners.
- 3. Being in a sexual relationship with a person who has more than a one sex partner.
- 4. Having sex without protection
- 5. Having a history of pelvic inflammatory disease or a sexually transmitted infection.





6) There is a small increased risk of PID after insertion of an intrauterine device (IUD). This risk is generally confined to the first 3 weeks after insertion.



## **SYMPTOMS**



- The signs and symptoms of pelvic inflammatory disease might be mild and difficult to recognize. Some women don't have any signs or symptoms. When signs and symptoms of PID are present, they most often include:
- Pain- ranging from mild to severe in lower abdomen and pelvis.
- Abdominal or heavy vaginal discharge that may have an unpleasant odour.
- Abnormal uterine bleeding, especially during or after intercourse or between menstural cycles.





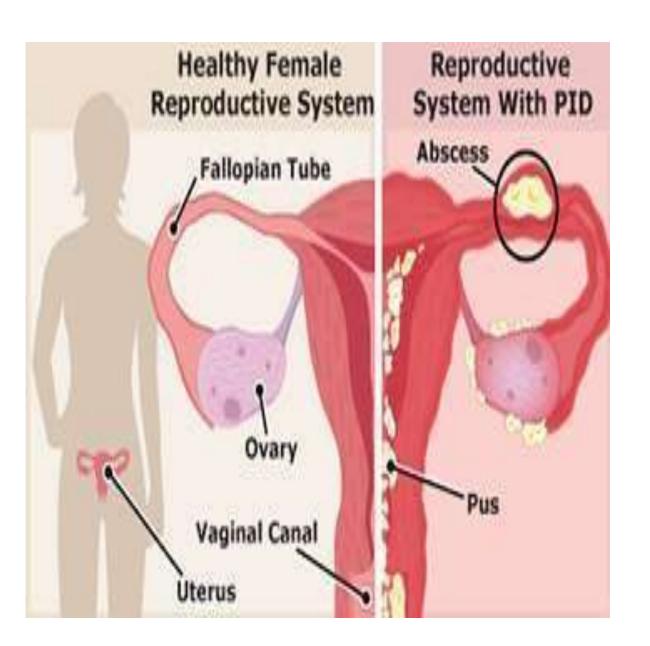
- Pain during intercourse.
- Fever, sometimes with chills.
- Painful, frequent or difficult urination.





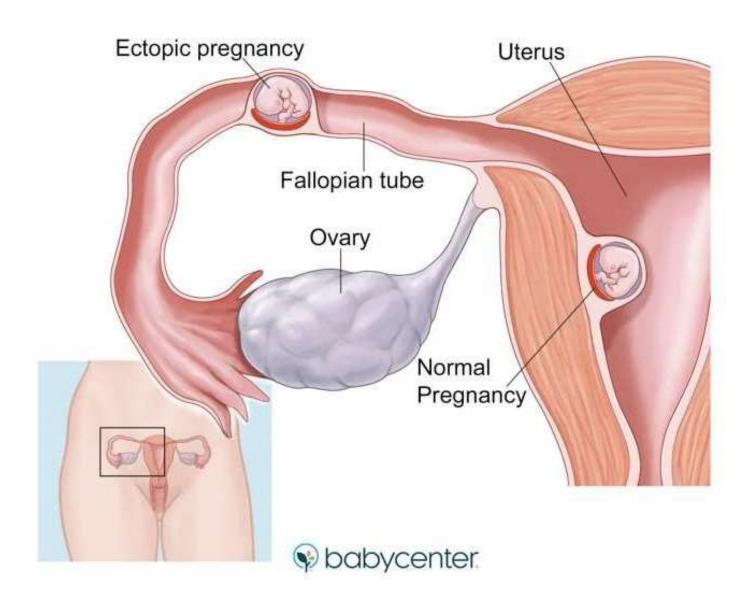
## **COMPLICATIONS**

- Ectopic pregnancy
- Infertility
- Chronic pelvic pain
- Tubo-ovarian abscess













#### DIAGNOSIS

- Medical history
- Signs and symptoms
- A pelvic exam. During the exam, doctor will check pelvic region for tenderness and swelling. Doctor may also use cotton swabs to take fluid samples from vagina and cervix. The samples will be tested at a lab for signs of infection and organisms such as gonorrhea and chlamydia





- **Blood and urine tests.** These tests may be used to test for pregnancy, HIV or other sexually transmitted infections, or to measure white blood cell counts or other markers of infection or inflammation.
- **Ultrasound.** This test uses sound waves to create images of reproductive organs.
- Laparoscopy. During this procedure, your doctor inserts a thin, lighted instrument through a small incision in your abdomen to view your pelvic organs.
- Endometrial biopsy. During this procedure, your doctor inserts a thin tube into the uterus to remove a small sample of endometrial tissue. The tissue is tested for signs of infection and inflammation.





• **Carnett's sign** – Place finger on the painful or tender area of the abdomen of the Patient. Patient raise both the legs off the table while lying in supine lying position.











## TREATMENT

#### ANTIBIOTIC

- Regimen A Cefoteten 2g IV + doxycycline
   100mg orally / IV
- 2. Regimen B Cefoxitin 2g IV + doxycyciline 100mg orally/ IV.
- 3. Regimen C Clindamycin 900mg IV + gentamycin 2mg/kg, followed by maintainence dose 1.5 mg/kg,.





- ALTERNATIVE ampicillin sulbactam 3g IV
   + doxycycline 100 mg orally /IV
- Treatment of partner
- Temporary abstinence
- Surgical management laparotomy

  Hysterectomy

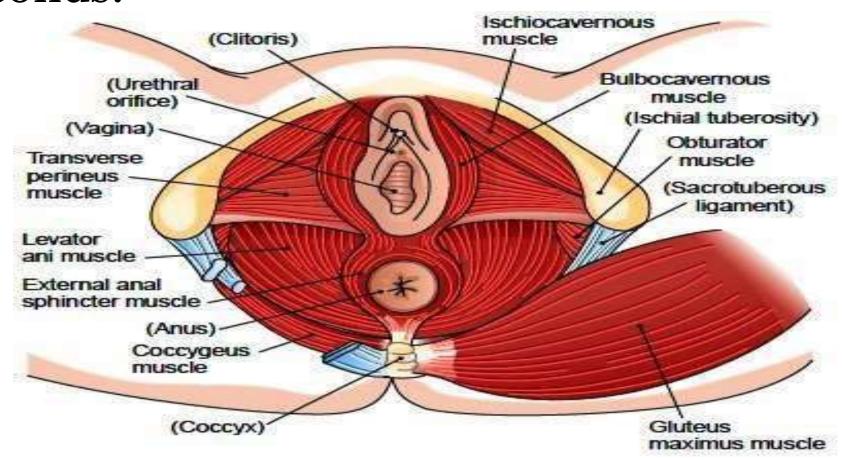


#### PHYSIOTHERAPY TREATMENT



#### PELVIC FLOOR REHABILITATION

Kegel exercises – contracting and relaxing of pelvic floor muscles. Hold and relax of 5 seconds.

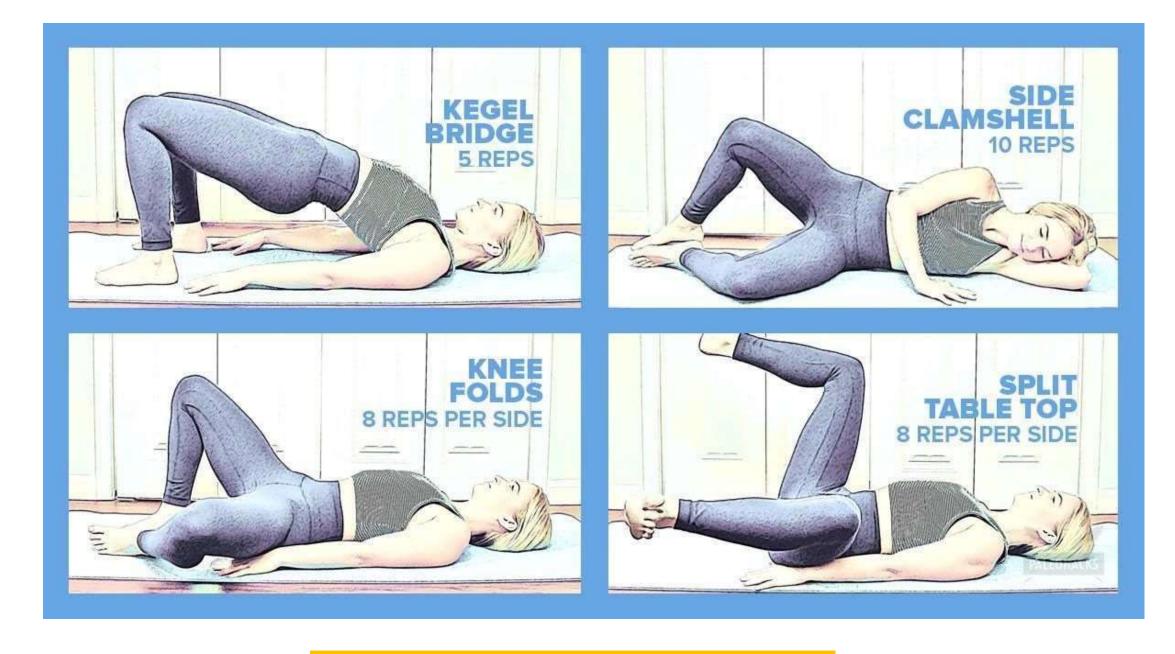








Split tabletop







## **PREVENTION**

- To reduce your risk of pelvic inflammatory disease:
- 1. Practice safe sex.
- 2. Talk to doctor about contraception. Many forms of contraception do not protect against the development of PID. Using barrier methods, such as a condom, helps to reduce risk. Even if take birth control pills, use a condom every time while having sex with a new partner to protect against STIs.





- Get tested
- Request partner to be tested
- Don't douche





#### ASSESSMENT

- 1. Define Pelvic inflammatory disease?
- 2.List down the causes of Pelvic inflammatory disease?
- 3. Enlist the signs and symptoms of Pelvic inflammatory disease?
- 4. Explain the pathophysiology of Pelvic inflammatory disease?
- 5. Explain the management of Pelvic inflammatory disease?





#### REFERENCES

• LEWIS(2014), TEXT BOOK OF MEDICAL SURGICALNURSING, 2<sup>ND</sup>

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• BRUNNER (2006),10<sup>TH-</sup> EDITION,TEXT BOOK OF MEDICAL SURGICAL

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## THANKYOU